PATENT APPLICATION FEE DETERMINATION RE Eff ctive December 8, 2004								ORD .	Application or Dock t Number			
								10/5:			39049	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENT	TY CEE	OR	OTHER SMALL E	
U.S	. NATIONAL S	TAGE FEES	(Colonia dy				1	RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 200		1	BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		All other situations = \$ 100 / \$ 200		1	EXAM FEE	100		EXAM. FEE	
SEARCH FEE			U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500			SEARCH FEE	<b>250</b>		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/50 ≑		1	X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			4 · mir	rus 20 =	٠ ۵١			X \$ 25 =	ડ્સક	OR	X \$ 50 =	
INDEPENDENT CLAIMS			3 m	lnus 3 =				X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPENI	DENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+\$360=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL E	
AMENDMENT A	-	CLAIMS REMAINING AFTER AMENDMENT	• ·	HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 41	Minus	<b></b> €	11	<b>=</b> 0		X \$ 25 =		OR	X \$ 50 =	
	Independent	• 3	Minus	***	3	- 0		X \$ 100 =		OR	X\$200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$ 180 =		OR	+ \$ 360 =	
G	000	from			TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B	10/23/0	CLABAS PREMAINING AFTER AMENDMENT	!	HIGH NUM PREVIX PAID	BER DUSLY	PRESENT . EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 41	Minus	• 4	7	•—		X\$25=		OR	X \$ 50 =	
	Independent	• 3	Minus	••• (	9	•		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$180=		OR	+ \$ 360 =	
								YOTAL ADDIT. FEE		OR	TOTAL ADDIT.	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Praviously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Praviously Paid For" IN THIS SPACE is less than "3", enter "3".												
		nber Previously Paid					i in ti	e appropriate box	in column 1 <sub>.</sub>		•	ĺ